PTO/SB/08B(10-01)
Approved for use through 10/31/2002. OMB 0651-0031

U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE of the Page work Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number

Substitute for form 1449A/PTO Complete if Known Application Number 09/893,336 INFORMATION DISCLOSURE June 27, 2001 Filing Date STATEMENT BY APPLICANT First Named Inventor Doll et al. 3641 Group Art Unit Exten Felton (use as many sheets as necessary) **Examiner Name** Attorney Docket Number

OTHER PRIOR ART NON PATENT LITERATURE DOCUMENTS					
Examiner Initials *	Cite No.1	Include name of the author (in CAPITAL LETTERS), title of the article (when appropriate), title of the item (book, magazine, journal, serial, symposium, catalog, etc.), date, page(s), volume-issue number(s), publisher, city and/or country where published.	T 2		
a7		Joint Technical Bulletin, Navy document number NAVSEA INST 8020.8B, Air Force technical order 11A I 47, Defense Logistics Agency regulation DLAR 8220.1, and Army technical bulletin TB700 2, 5 January 1998, 99 pages.			
	<del></del> <del>-</del>				

	Examiner Signature	alen Felton	Date Considered	11/18/04
--	-----------------------	-------------	--------------------	----------

Burden Hour Statement: This form is estimated to take 2.0 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

+

<sup>\*</sup>EXAMINER: Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant.

<sup>&</sup>lt;sup>1</sup> Unique citation designation number (optional). <sup>2</sup> Applicant is to place a check mark here if English language Translation is attached.